# **SENATE BILL No. 502**

### DIGEST OF INTRODUCED BILL

Citations Affected: IC 6-3-7-5; IC 22-3.

**Synopsis:** Worker's compensation. Eliminates liability for failure to obtain evidence of worker's compensation coverage from a contractor or subcontractor. Repeals a provision requiring that an independent contractor obtain a certificate of exemption. Excludes executive officers of a corporation with fewer than three executive officers from the definition of "employee" for worker's compensation purposes. Requires the worker's compensation board to define "independent contractor".

Effective: Upon passage; July 1, 2004.

## Merritt

January 13, 2004, read first time and referred to Committee on Pensions and Labor.





#### Introduced

#### Second Regular Session 113th General Assembly (2004)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

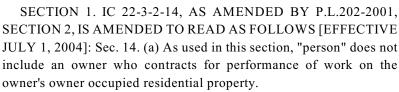
Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2003 Regular Session of the General Assembly.

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## SENATE BILL No. 502

A BILL FOR AN ACT to amend the Indiana Code concerning labor and industrial safety.

Be it enacted by the General Assembly of the State of Indiana:



(b) The state, any political division thereof, any municipal corporation, any corporation, limited liability company, partnership, or person, contracting for the performance of any work exceeding one thousand dollars (\$1,000) in value by a contractor subject to the compensation provisions of IC 22-3-2 through IC 22-3-6, without exacting from such contractor a certificate from the worker's compensation board showing that such contractor has complied with section 5 of this chapter, IC 22-3-5-1, and IC 22-3-5-2, shall be liable to the same extent as the contractor for compensation, physician's fees, hospital fees, nurse's charges, and burial expenses on account of the injury or death of any employee of such contractor, due to an accident arising out of and in the course of the performance of the work covered







by such contract.

(c) Any contractor who shall sublet any contract for the performance of any work, to a subcontractor subject to the compensation provisions of IC 22-3-2 through IC 22-3-6, without obtaining a certificate from the worker's compensation board showing that such subcontractor has complied with section 5 of this chapter, IC 22-3-5-1, and IC 22-3-5-2, shall be liable to the same extent as such subcontractor for the payment of compensation, physician's fees, hospital fees, nurse's charges, and burial expenses on account of the injury or death of any employee of such subcontractor due to an accident arising out of and in the course of the performance of the work covered by such subcontract.

(d) (b) The state, any political division thereof, any municipal corporation, any corporation, limited liability company, partnership, person, or contractor paying compensation, physician's fees, hospital fees, nurse's charges, or burial expenses under this section article may recover the amount paid or to be paid from any person who, independently of such provisions, would have been liable for the payment thereof and may, in addition, recover the litigation expenses and attorney's fees incurred in the action before the worker's compensation board as well as the litigation expenses and attorney's fees incurred in an action to collect the compensation, medical expenses, and burial expenses.

(e) (c) Every claim filed with the worker's compensation board under this section shall be instituted against all parties liable for payment. The worker's compensation board, in an award under subsection (b), shall fix the order in which said parties shall be exhausted, beginning with the immediate employer, and, in an award under subsection (c), shall determine whether the subcontractor has the financial ability to pay the compensation and medical expenses when due and, if not, shall order the contractor to pay the compensation and medical expenses.

SECTION 2. IC 22-3-2-14.5, AS AMENDED BY P.L.202-2001, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2004]: Sec. 14.5. (a) As used in this section, "independent contractor" refers to a person described in IC 22-3-6-1(b)(7).

- (b) As used in this section, "person" means an individual, a proprietorship, a partnership, a joint venture, a firm, an association, a corporation, or other legal entity.
- (c) (b) An independent contractor who does not make an election under IC 22-3-6-1(b)(4) or IC 22-3-6-1(b)(5) is not subject to the compensation provisions of IC 22-3-2 through IC 22-3-6. and must file a statement with the department of state revenue in accordance with



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1	IC 6-3-7-5 and obtain a certificate of exemption.
2	(d) Together with the statement required in subsection (c), an
3	independent contractor shall file annually with the department
4	documentation in support of independent contractor status before being
5	granted a certificate of exemption. The independent contractor must
6	obtain clearance from the department of state revenue before issuance
7	of the certificate.
8	(e) An independent contractor shall pay a filing fee in the amount
9	of fifteen dollars (\$15) with the certificate filed under subsection (g).
0	The fees collected under this subsection shall be deposited in the
1	worker's compensation supplemental administrative fund and shall be
2	used for all expenses the board incurs.
.3	(f) The worker's compensation board shall maintain a data base
4	consisting of certificates received under this section and on request
.5	may verify that a certificate was filed.
6	(g) A certificate of exemption must be filed with the worker's
.7	compensation board. The board shall indicate that the certificate has
8	been filed by stamping the certificate with the date of receipt and
9	returning a stamped copy to the person filing the certificate. A
20	certificate becomes effective as of midnight seven (7) business days
21	after the date file stamped by the worker's compensation board. The
22	board shall maintain a data base containing the information required in
23	subsections (d) and (f).
24	(h) A person who contracts for services of another person not
2.5	covered by IC 22-3-2 through IC 22-3-6 to perform work must secure
26	a copy of a stamped certificate of exemption filed under this section
27	from the person hired. A person may not require a person who has
28	provided a stamped certificate to have worker's compensation
29	coverage. The worker's compensation insurance carrier of a person who
30	contracts with an independent contractor shall accept a stamped
51	certificate in the same manner as a certificate of insurance.
32	(i) A stamped certificate filed under this section is binding on and
33	holds harmless from all claims:
34	(1) a person who contracts with an independent contractor after
55	receiving a copy of the stamped certificate; and
66	(2) the worker's compensation insurance carrier of the person who
57	contracts with the independent contractor.
8	The independent contractor may not collect compensation under
9	IC 22-3-2 through IC 22-3-6 for an injury from a person or the person's
10	worker's compensation carrier to whom the independent contractor has
1	furnished a stamped certificate.
12	SECTION 3. IC 22-3-4-13, AS AMENDED BY P.L.235-1999,



SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
JULY 1, 2004]: Sec. 13. (a) Every employer shall keep a record of all
injuries, fatal or otherwise, received by or claimed to have been
received by his employees in the course of their employment. Within
seven (7) days after the occurrence and knowledge thereof, as provided
in IC 22-3-3-1, of any injury to an employee causing his death or his
absence from work for more than one (1) day, a report thereof shall be
made in writing and mailed to the employer's insurance carrier or, if the
employer is self insured, delivered to the worker's compensation board
in the manner provided in subsections (b) and (c). The insurance
carrier shall deliver the report to the worker's compensation board in
the manner provided in subsections (b) and (c) not later than seven (7)
days after receipt of the report or fourteen (14) days after the
employer's knowledge of the injury, whichever is later. An employer or
insurance carrier that fails to comply with this subsection is subject to
a civil penalty of fifty dollars (\$50), to be assessed and collected by the
board. Civil penalties collected under this section shall be deposited in
the state general fund.

- (b) All insurance carriers, companies who carry risk without insurance, and third party administrators reporting accident information to the board in compliance with subsection (a) shall:
  - (1) report the information using electronic data interchange standards prescribed by the board no later than June 30, 1999; or (2) in the alternative, the reporting entity shall have an implementation plan approved by the board no later than June 30, 2000, that provides for the ability to report the information using electronic data interchange standards prescribed by the board no later than December 31, 2000.

Prior to the June 30, 2000, and December 31, 2000, deadlines, the reporting entity may continue to report accidents to the board by mail in compliance with subsection (a).

- (c) The report shall contain the name, nature, and location of the business of the employer, the name, age, sex, wages, occupation of the injured employee, the date and hour of the accident causing the alleged injury, the nature and cause of the injury, and such other information as may be required by the board.
- (d) A person who violates any provision of this article, except IC 22-3-5-1 or IC 22-3-7-34(a) or IC 22-3-7-34(b), commits a Class C infraction. A person who violates IC 22-3-5-1 or IC 22-3-7-34(a) or IC 22-3-7-34(b) commits a Class A infraction. The worker's compensation board in the name of the state may seek relief from any court of competent jurisdiction to enjoin any violation of this article.









1	(e) The venue of all criminal actions under this section lies in the
2	county in which the employee was injured. The prosecuting attorney of
3	the county shall prosecute all such violations upon written request of
4	the worker's compensation board. Such violations shall be prosecuted
5	in the name of the state.
6	(f) In an action before the board against an employer who at the time
7	of the injury to or occupational disease of an employee had failed to
8	comply with IC 22-3-5-1 or IC 22-3-7-34(a) or IC 22-3-7-34(b), the
9	board may award to the employee or the dependents of a deceased
10	employee:
11	(1) compensation not to exceed double the compensation
12	provided by this article;
13	(2) medical expenses; and
14	(3) reasonable attorney fees in addition to the compensation and
15	medical expenses.
16	(g) In an action under subsection (c) the court may:
17	(1) order the employer to cease doing business in Indiana until the
18	employer furnishes proof of insurance as required by IC 22-3-5-1
19	and IC 22-3-7-34(a) or IC 22-3-7-34(b);
20	(2) require satisfactory proof of the employer's financial ability to
21	pay any compensation or medical expenses in the amount and
22	manner and when due as provided for in IC 22-3, for any injuries
23	which occurred during any period of noncompliance; and
24	(3) require the employer to deposit with the worker's
25	compensation board an acceptable security, indemnity, or bond to
26	secure the payment of such compensation and medical expense
27	liabilities.
28	(h) The penalty provisions of subsection (e) shall apply only to the
29	employer and shall not apply for a failure to exact a certificate of
30	insurance under <del>IC 22-3-2-14 or</del> IC 22-3-7-34(i) or IC 22-3-7-34(j).
31	SECTION 4. IC 22-3-5-6, AS AMENDED BY P.L.202-2001,
32	SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
33	JULY 1, 2004]: Sec. 6. (a) The worker's compensation supplemental
34	administrative fund is established for the purpose of carrying out the
35	administrative purposes and functions of the worker's compensation
36	board. The fund consists of fees collected from employers under
37	sections 1 through 2 of this chapter. and from fees collected under
38	IC 22-3-2-14.5 and IC 22-3-7-34.5. The fund shall be administered by
39	the worker's compensation board. Money in the fund is annually
40	appropriated to the worker's compensation board and shall be used for
41	all expenses incurred by the worker's compensation board.

(b) The money in the fund is not to be used to replace funds



otherwise appropriated to the board. Money in the fund at the end of the state fiscal year does not revert to the state general fund.

SECTION 5. IC 22-3-6-1, AS AMENDED BY P.L.202-2001, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2004]: Sec. 1. In IC 22-3-2 through IC 22-3-6, unless the context otherwise requires:

- (a) "Employer" includes the state and any political subdivision, any municipal corporation within the state, any individual or the legal representative of a deceased individual, firm, association, limited liability company, or corporation or the receiver or trustee of the same, using the services of another for pay. A parent corporation and its subsidiaries shall each be considered joint employers of the corporation's, the parent's, or the subsidiaries' employees for purposes of IC 22-3-2-6 and IC 22-3-3-31. Both a lessor and a lessee of employees shall each be considered joint employers of the employees provided by the lessor to the lessee for purposes of IC 22-3-2-6 and IC 22-3-3-31. If the employer is insured, the term includes the employer's insurer so far as applicable. However, the inclusion of an employer's insurer within this definition does not allow an employer's insurer to avoid payment for services rendered to an employee with the approval of the employer. The term also includes an employer that provides on-the-job training under the federal School to Work Opportunities Act (20 U.S.C. 6101 et seq.) to the extent set forth in IC 22-3-2-2.5.
- (b) "Employee" means every person, including a minor, in the service of another, under any contract of hire or apprenticeship, written or implied, except one whose employment is both casual and not in the usual course of the trade, business, occupation, or profession of the employer.
  - (1) An executive officer elected or appointed and empowered in accordance with the charter and bylaws of a corporation, other than a municipal corporation or governmental subdivision, or a charitable, religious, educational, or other nonprofit corporation, or a corporation with less than three (3) executive officers, is an employee of the corporation under IC 22-3-2 through IC 22-3-6.
  - (2) An executive officer of a municipal corporation or other governmental subdivision, or of a charitable, religious, educational, or other nonprofit corporation, or a corporation with less than three (3) executive officers, may, notwithstanding any other provision of IC 22-3-2 through IC 22-3-6, be brought within the coverage of its insurance contract by the corporation by



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1	specifically including the executive officer in the contract of
2	insurance. The election to bring the executive officer within the
3	coverage shall continue for the period the contract of insurance is
4	in effect, and during this period, the executive officers thus
5	brought within the coverage of the insurance contract are
6	employees of the corporation under IC 22-3-2 through IC 22-3-6.
7	(3) Any reference to an employee who has been injured, when the
8	employee is dead, also includes the employee's legal
9	representatives, dependents, and other persons to whom
10	compensation may be payable.
11	(4) An owner of a sole proprietorship may elect to include the
12	owner as an employee under IC 22-3-2 through IC 22-3-6 if the
13	owner is actually engaged in the proprietorship business. If the
14	owner makes this election, the owner must serve upon the owner's
15	insurance carrier and upon the board written notice of the
16	election. No owner of a sole proprietorship may be considered an
17	employee under IC 22-3-2 through IC 22-3-6 until the notice has
18	been received. If the owner of a sole proprietorship is an
19	independent contractor in the construction trades and does not
20	make the election provided under this subdivision, the owner
21	must obtain an affidavit of exemption under IC 22-3-2-14.5.
22	(5) A partner in a partnership may elect to include the partner as
23	an employee under IC 22-3-2 through IC 22-3-6 if the partner is
24	actually engaged in the partnership business. If a partner makes
25	this election, the partner must serve upon the partner's insurance
26	carrier and upon the board written notice of the election. No
27	partner may be considered an employee under IC 22-3-2 through
28	IC 22-3-6 until the notice has been received. If a partner in a
29	partnership is an independent contractor in the construction trades
30	and does not make the election provided under this subdivision,
31	the partner must obtain an affidavit of exemption under
32	<del>IC</del> <del>22-3-2-14.5.</del>
33	(6) Real estate professionals are not employees under IC 22-3-2
34	through IC 22-3-6 if:
35	(A) they are licensed real estate agents;
36	(B) substantially all their remuneration is directly related to
37	sales volume and not the number of hours worked; and
38	(C) they have written agreements with real estate brokers
39	stating that they are not to be treated as employees for tax
40	purposes.
41	(7) A person is an independent contractor in the construction

trades and not an employee under IC 22-3-2 through IC 22-3-6 if



1	the person is an independent contractor:
2	(A) under the guidelines of the United States Internal Revenue
3	Service; or
4	(B) under a definition adopted in the manner prescribed by
5	IC 4-22-2 by the worker's compensation board, with the
6	assistance of the worker's compensation rating bureau and
7	the department of insurance.
8	(8) An owner-operator that provides a motor vehicle and the
9	services of a driver under a written contract that is subject to
10	IC 8-2.1-24-23, 45 IAC 16-1-13, or 49 CFR 1057, to a motor
11	carrier is not an employee of the motor carrier for purposes of
12	IC 22-3-2 through IC 22-3-6. The owner-operator may elect to be
13	covered and have the owner-operator's drivers covered under a
14	worker's compensation insurance policy or authorized
15	self-insurance that insures the motor carrier if the owner-operator
16	pays the premiums as requested by the motor carrier. An election
17	by an owner-operator under this subdivision does not terminate
18	the independent contractor status of the owner-operator for any
19	purpose other than the purpose of this subdivision.
20	(9) A member or manager in a limited liability company may elect
21	to include the member or manager as an employee under
22	IC 22-3-2 through IC 22-3-6 if the member or manager is actually
23	engaged in the limited liability company business. If a member or
24	manager makes this election, the member or manager must serve
25	upon the member's or manager's insurance carrier and upon the
26	board written notice of the election. A member or manager may
27	not be considered an employee under IC 22-3-2 through IC 22-3-6
28	until the notice has been received.
29	(10) An unpaid participant under the federal School to Work
30	Opportunities Act (20 U.S.C. 6101 et seq.) is an employee to the
31	extent set forth in IC 22-3-2-2.5.
32	(c) "Minor" means an individual who has not reached seventeen
33	(17) years of age.
34	(1) Unless otherwise provided in this subsection, a minor
35	employee shall be considered as being of full age for all purposes
36	of IC 22-3-2 through IC 22-3-6.
37	(2) If the employee is a minor who, at the time of the accident, is
38	employed, required, suffered, or permitted to work in violation of
39	IC 20-8.1-4-25, the amount of compensation and death benefits,
40	as provided in IC 22-3-2 through IC 22-3-6, shall be double the
41	amount which would otherwise be recoverable. The insurance
42	carrier shall be liable on its policy for one-half (1/2) of the



compensation or benefits that may be payable on account of the injury or death of the minor, and the employer shall be liable for
the other one-half $(1/2)$ of the compensation or benefits. If the
employee is a minor who is not less than sixteen (16) years of age
and who has not reached seventeen (17) years of age and who at
the time of the accident is employed, suffered, or permitted to
work at any occupation which is not prohibited by law, this
subdivision does not apply.
(3) A minor employee who, at the time of the accident, is a
student performing services for an employer as part of an
approved program under IC 20-10.1-6-7 shall be considered a
full-time employee for the purpose of computing compensation
for permanent impairment under IC 22-3-3-10. The average

in subsection (d)(4).

(4) The rights and remedies granted in this subsection to a minor under IC 22-3-2 through IC 22-3-6 on account of personal injury or death by accident shall exclude all rights and remedies of the minor, the minor's parents, or the minor's personal representatives, dependents, or next of kin at common law, statutory or otherwise, on account of the injury or death. This subsection does not apply to minors who have reached seventeen (17) years of age.

weekly wages for such a student shall be calculated as provided

- (d) "Average weekly wages" means the earnings of the injured employee in the employment in which the employee was working at the time of the injury during the period of fifty-two (52) weeks immediately preceding the date of injury, divided by fifty-two (52), except as follows:
  - (1) If the injured employee lost seven (7) or more calendar days during this period, although not in the same week, then the earnings for the remainder of the fifty-two (52) weeks shall be divided by the number of weeks and parts thereof remaining after the time lost has been deducted.
  - (2) Where the employment prior to the injury extended over a period of less than fifty-two (52) weeks, the method of dividing the earnings during that period by the number of weeks and parts thereof during which the employee earned wages shall be followed, if results just and fair to both parties will be obtained. Where by reason of the shortness of the time during which the employee has been in the employment of the employee's employer or of the casual nature or terms of the employment it is impracticable to compute the average weekly wages, as defined









1	in this subsection, regard shall be had to the average weekly	
2	amount which during the fifty-two (52) weeks previous to the	
3	injury was being earned by a person in the same grade employed	
4	at the same work by the same employer or, if there is no person so	
5	employed, by a person in the same grade employed in the same	
6	class of employment in the same district.	
7	(3) Wherever allowances of any character made to an employee	
8	in lieu of wages are a specified part of the wage contract, they	
9	shall be deemed a part of his the employee's earnings.	
10	(4) In computing the average weekly wages to be used in	
11	calculating an award for permanent impairment under	
12	IC 22-3-3-10 for a student employee in an approved training	
13	program under IC 20-10.1-6-7, the following formula shall be	
14	used. Calculate the product of:	
15	(A) the student employee's hourly wage rate; multiplied by	
16	(B) forty (40) hours.	
17	The result obtained is the amount of the average weekly wages for	
18	the student employee.	
19	(e) "Injury" and "personal injury" mean only injury by accident	
20	arising out of and in the course of the employment and do not include	
21	a disease in any form except as it results from the injury.	
22	(f) "Billing review service" refers to a person or an entity that	
23	reviews a medical service provider's bills or statements for the purpose	
24	of determining pecuniary liability. The term includes an employer's	
25	worker's compensation insurance carrier if the insurance carrier	
26	performs such a review.	
27	(g) "Billing review standard" means the data used by a billing	
28	review service to determine pecuniary liability.	
29	(h) "Community" means a geographic service area based on zip	
30	code districts defined by the United States Postal Service according to	
31	the following groupings:	
32	(1) The geographic service area served by zip codes with the first	
33	three (3) digits 463 and 464.	
34	(2) The geographic service area served by zip codes with the first	
35	three (3) digits 465 and 466.	
36	(3) The geographic service area served by zip codes with the first	
37	three (3) digits 467 and 468.	
38	(4) The geographic service area served by zip codes with the first	
39	three (3) digits 469 and 479.	
40	(5) The geographic service area served by zip codes with the first	
41	three (3) digits 460, 461 (except 46107), and 473.	
42	(6) The geographic service area served by the 46107 zip code and	



zip codes with the first three (3) digits 462.

- (7) The geographic service area served by zip codes with the first three (3) digits 470, 471, 472, 474, and 478.
- (8) The geographic service area served by zip codes with the first three (3) digits 475, 476, and 477.
- (i) "Medical service provider" refers to a person or an entity that provides medical services, treatment, or supplies to an employee under IC 22-3-2 through IC 22-3-6.
- (j) "Pecuniary liability" means the responsibility of an employer or the employer's insurance carrier for the payment of the charges for each specific service or product for human medical treatment provided under IC 22-3-2 through IC 22-3-6 in a defined community, equal to or less than the charges made by medical service providers at the eightieth percentile in the same community for like services or products.

SECTION 6. IC 22-3-6-4 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2004]: Sec. 4. An insurance company writing worker's compensation insurance coverage in Indiana shall use the definition of independent contractor set forth in section 1(b)(7) of this chapter to determine, for rating purposes, whether an employer-employee relationship exists.

SECTION 7. IC 22-3-7-9, AS AMENDED BY P.L.202-2001, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2004]: Sec. 9. (a) As used in this chapter, "employer" includes the state and any political subdivision, any municipal corporation within the state, any individual or the legal representative of a deceased individual, firm, association, limited liability company, or corporation or the receiver or trustee of the same, using the services of another for pay. A parent corporation and its subsidiaries shall each be considered joint employers of the corporation's, the parent's, or the subsidiaries' employees for purposes of sections 6 and 33 of this chapter. Both a lessor and a lessee of employees shall each be considered joint employers of the employees provided by the lessor to the lessee for purposes of sections 6 and 33 of this chapter. The term also includes an employer that provides on-the-job training under the federal School to Work Opportunities Act (20 U.S.C. 6101 et seq.) to the extent set forth under section 2.5 of this chapter. If the employer is insured, the term includes his the employer's insurer so far as applicable. However, the inclusion of an employer's insurer within this definition does not allow an employer's insurer to avoid payment for services rendered to an employee with the approval of the employer.

(b) As used in this chapter, "employee" means every person,











1 including a minor, in the service of another, under any contract of hire 2 or apprenticeship written or implied, except one whose employment is 3 both casual and not in the usual course of the trade, business, 4 occupation, or profession of the employer. For purposes of this chapter 5 the following apply: 6 (1) Any reference to an employee who has suffered disablement, 7 when the employee is dead, also includes his the employee's 8 legal representative, dependents, and other persons to whom 9 compensation may be payable. 10 (2) An owner of a sole proprietorship may elect to include himself or herself as an employee under this chapter if he the owner is 11 12 actually engaged in the proprietorship business. If the owner 13 makes this election, he the owner must serve upon his the 14 owner's insurance carrier and upon the board written notice of the election. No owner of a sole proprietorship may be considered 15 16 an employee under this chapter unless the notice has been 17 received. If the owner of a sole proprietorship is an independent 18 contractor in the construction trades and does not make the 19 election provided under this subdivision, the owner must obtain 20 an affidavit of exemption under section 34.5 of this chapter. 21 (3) A partner in a partnership may elect to include himself or 22 herself as an employee under this chapter if he the partner is 23 actually engaged in the partnership business. If a partner makes 24 this election, he the partner must serve upon his the partner's 25 insurance carrier and upon the board written notice of the 26 election. No partner may be considered an employee under this 27 chapter until the notice has been received. If a partner in a 28 partnership is an independent contractor in the construction trades 29 and does not make the election provided under this subdivision, 30 the partner must obtain an affidavit of exemption under section 31 34.5 of this chapter. 32 (4) Real estate professionals are not employees under this chapter 33 if: 34 (A) they are licensed real estate agents; 35 (B) substantially all their remuneration is directly related to 36 sales volume and not the number of hours worked; and 37 (C) they have written agreements with real estate brokers 38 stating that they are not to be treated as employees for tax 39 purposes. 40 (5) A person is an independent contractor in the construction

trades and not an employee under this chapter if the person is an



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independent contractor:

- (A) under the guidelines of the United States Internal Revenue Service; or
- (B) under a definition adopted in the manner prescribed by IC 4-22-2 by the worker's compensation board, with the assistance of the worker's compensation rating bureau and the department of insurance.
- (6) An owner-operator that provides a motor vehicle and the services of a driver under a written contract that is subject to IC 8-2.1-24-23, 45 IAC 16-1-13, or 49 CFR 1057, to a motor carrier is not an employee of the motor carrier for purposes of this chapter. The owner-operator may elect to be covered and have the owner-operator's drivers covered under a worker's compensation insurance policy or authorized self-insurance that insures the motor carrier if the owner-operator pays the premiums as requested by the motor carrier. An election by an owner-operator under this subdivision does not terminate the independent contractor status of the owner-operator for any purpose other than the purpose of this subdivision.
- (7) An unpaid participant under the federal School to Work Opportunities Act (20 U.S.C. 6101 et seq.) is an employee to the extent set forth under section 2.5 of this chapter.
- (c) As used in this chapter, "minor" means an individual who has not reached seventeen (17) years of age. A minor employee shall be considered as being of full age for all purposes of this chapter. However, if the employee is a minor who, at the time of the last exposure, is employed, required, suffered, or permitted to work in violation of the child labor laws of this state, the amount of compensation and death benefits, as provided in this chapter, shall be double the amount which would otherwise be recoverable. The insurance carrier shall be liable on its policy for one-half (1/2) of the compensation or benefits that may be payable on account of the disability or death of the minor, and the employer shall be wholly liable for the other one-half (1/2) of the compensation or benefits. If the employee is a minor who is not less than sixteen (16) years of age and who has not reached seventeen (17) years of age, and who at the time of the last exposure is employed, suffered, or permitted to work at any occupation which is not prohibited by law, the provisions of this subsection prescribing double the amount otherwise recoverable do not apply. The rights and remedies granted to a minor under this chapter on account of disease shall exclude all rights and remedies of the minor, his the minor's parents, his the minor's personal representatives, dependents, or next of kin at common law, statutory or otherwise, on











account of any disease.

- (d) This chapter does not apply to casual laborers as defined in subsection (b), nor to farm or agricultural employees, nor to household employees, nor to railroad employees engaged in train service as engineers, firemen, conductors, brakemen, flagmen, baggagemen, or foremen in charge of yard engines and helpers assigned thereto, nor to their employers with respect to these employees. Also, this chapter does not apply to employees or their employers with respect to employments in which the laws of the United States provide for compensation or liability for injury to the health, disability, or death by reason of diseases suffered by these employees.
- (e) As used in this chapter, "disablement" means the event of becoming disabled from earning full wages at the work in which the employee was engaged when last exposed to the hazards of the occupational disease by the employer from whom he the employee claims compensation or equal wages in other suitable employment, and "disability" means the state of being so incapacitated.
- (f) For the purposes of this chapter, no compensation shall be payable for or on account of any occupational diseases unless disablement, as defined in subsection (e), occurs within two (2) years after the last day of the last exposure to the hazards of the disease except for the following:
  - (1) In all cases of occupational diseases caused by the inhalation of silica dust or coal dust, no compensation shall be payable unless disablement, as defined in subsection (e), occurs within three (3) years after the last day of the last exposure to the hazards of the disease.
  - (2) In all cases of occupational disease caused by the exposure to radiation, no compensation shall be payable unless disablement, as defined in subsection (e), occurs within two (2) years from the date on which the employee had knowledge of the nature of his the employee's occupational disease or, by exercise of reasonable diligence, should have known of the existence of such disease and its causal relationship to his the employee's employment.
  - (3) In all cases of occupational diseases caused by the inhalation of asbestos dust, no compensation shall be payable unless disablement, as defined in subsection (e), occurs within three (3) years after the last day of the last exposure to the hazards of the disease if the last day of the last exposure was before July 1, 1985.

    (4) In all cases of occupational disease caused by the inhalation
  - of asbestos dust in which the last date of the last exposure occurs on or after July 1, 1985, and before July 1, 1988, no compensation











1	shall be payable unless disablement, as defined in subsection (e),	
2	occurs within twenty (20) years after the last day of the last	
3	exposure.	
4	(5) In all cases of occupational disease caused by the inhalation	
5	of asbestos dust in which the last date of the last exposure occurs	
6	on or after July 1, 1988, no compensation shall be payable unless	
7	disablement (as defined in subsection (e)) occurs within	
8	thirty-five (35) years after the last day of the last exposure.	
9	(g) For the purposes of this chapter, no compensation shall be	
.0	payable for or on account of death resulting from any occupational	
1	disease unless death occurs within two (2) years after the date of	
2	disablement. However, this subsection does not bar compensation for	
.3	death:	
4	(1) where death occurs during the pendency of a claim filed by an	
5	employee within two (2) years after the date of disablement and	
6	which claim has not resulted in a decision or has resulted in a	
.7	decision which is in process of review or appeal; or	
. 8	(2) where, by agreement filed or decision rendered, a	
9	compensable period of disability has been fixed and death occurs	
20	within two (2) years after the end of such fixed period, but in no	
21	event later than three hundred (300) weeks after the date of	
22	disablement.	
23	(h) As used in this chapter, "billing review service" refers to a	
24	person or an entity that reviews a medical service provider's bills or	
25	statements for the purpose of determining pecuniary liability. The term	
26	includes an employer's worker's compensation insurance carrier if the	
27	insurance carrier performs such a review.	
28	(i) As used in this chapter, "billing review standard" means the data	
29	used by a billing review service to determine pecuniary liability.	
0	(j) As used in this chapter, "community" means a geographic service	
31	area based on zip code districts defined by the United States Postal	
32	Service according to the following groupings:	
3	(1) The geographic service area served by zip codes with the first	
34	three (3) digits 463 and 464.	
55	(2) The geographic service area served by zip codes with the first	
66	three (3) digits 465 and 466.	
57	(3) The geographic service area served by zip codes with the first	
8	three (3) digits 467 and 468.	
19	(4) The geographic service area served by zip codes with the first	
10	three (3) digits 469 and 479.	
1	(5) The geographic service area served by zip codes with the first	
12	three (3) digits 460, 461 (except 46107), and 473.	



1	(6) The geographic service area served by the 46107 zip code and
2	zip codes with the first three (3) digits 462.
3	(7) The geographic service area served by zip codes with the first
4	three (3) digits 470, 471, 472, 474, and 478.
5	(8) The geographic service area served by zip codes with the first
6	three (3) digits 475, 476, and 477.
7	(k) As used in this chapter, "medical service provider" refers to a
8	person or an entity that provides medical services, treatment, or
9	supplies to an employee under this chapter.
10	(l) As used in this chapter, "pecuniary liability" means the
11	responsibility of an employer or the employer's insurance carrier for the
12	payment of the charges for each specific service or product for human
13	medical treatment provided under this chapter in a defined community,
14	equal to or less than the charges made by medical service providers at
15	the eightieth percentile in the same community for like services or
16	products.
17	SECTION 8. IC 22-3-7-34, AS AMENDED BY P.L.202-2001,
18	SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
19	JULY 1, 2004]: Sec. 34. (a) As used in this section, "person" does not
20	include an owner who contracts for performance of work on the
21	owner's owner occupied residential property.
22	(b) Every employer bound by the compensation provisions of this
23	chapter, except the state, counties, townships, cities, towns, school
24	cities, school towns, school townships, other municipal corporations,
25	state institutions, state boards, and state commissions, shall insure the
26	payment of compensation to the employer's employees and their
27	dependents in the manner provided in this chapter, or procure from the
28	worker's compensation board a certificate authorizing the employer to
29	carry such risk without insurance. While that insurance or certificate
30	remains in force, the employer, or those conducting the employer's
31	business, and the employer's occupational disease insurance carrier
32	shall be liable to any employee and the employee's dependents for
33	disablement or death from occupational disease arising out of and in
34	the course of employment only to the extent and in the manner
35	specified in this chapter.
36	(c) Every employer who, by election, is bound by the compensation
37	provisions of this chapter, except those exempted from the provisions
38	by subsection (b), shall:
39	(1) insure and keep insured the employer's liability under this
40	chapter in some corporation, association, or organization
41	authorized to transact the business of worker's compensation
42	insurance in this state; or



(2) furnish to the worker's compensation board satisfactory proof
of the employer's financial ability to pay the compensation in the
amount and manner and when due as provided for in this chapter.
In the latter case the board may require the deposit of an acceptable
security, indemnity, or bond to secure the payment of compensation
liabilities as they are incurred.

- (d) Every employer required to carry insurance under this section shall file with the worker's compensation board in the form prescribed by it, within ten (10) days after the termination of the employer's insurance by expiration or cancellation, evidence of the employer's compliance with subsection (c) and other provisions relating to the insurance under this chapter. The venue of all criminal actions under this section lies in the county in which the employee was last exposed to the occupational disease causing disablement. The prosecuting attorney of the county shall prosecute all violations upon written request of the board. The violations shall be prosecuted in the name of the state.
- (e) Whenever an employer has complied with subsection (c) relating to self-insurance, the worker's compensation board shall issue to the employer a certificate which shall remain in force for a period fixed by the board, but the board may, upon at least thirty (30) days notice, and a hearing to the employer, revoke the certificate, upon presentation of satisfactory evidence for the revocation. After the revocation, the board may grant a new certificate to the employer upon the employer's petition, and satisfactory proof of the employer's financial ability.
- (f)(1) Subject to the approval of the worker's compensation board, any employer may enter into or continue any agreement with the employer's employees to provide a system of compensation, benefit, or insurance in lieu of the compensation and insurance provided by this chapter. A substitute system may not be approved unless it confers benefits upon employees and their dependents at least equivalent to the benefits provided by this chapter. It may not be approved if it requires contributions from the employees unless it confers benefits in addition to those provided under this chapter, which are at least commensurate with such contributions.
- (f)(2) The substitute system may be terminated by the worker's compensation board on reasonable notice and hearing to the interested parties, if it appears that the same is not fairly administered or if its operation shall disclose latent defects threatening its solvency, or if for any substantial reason it fails to accomplish the purpose of this chapter. On termination, the board shall determine the proper distribution of all remaining assets, if any, subject to the right of any party in interest to











take an appeal to the court of appeals.

2.8

(g)(1) No insurer shall enter into or issue any policy of insurance under this chapter until its policy form has been submitted to and approved by the worker's compensation board. The board shall not approve the policy form of any insurance company until the company shall file with it the certificate of the insurance commissioner showing that the company is authorized to transact the business of worker's compensation insurance in Indiana. The filing of a policy form by any insurance company or reciprocal insurance association with the board for approval constitutes on the part of the company or association a conclusive and unqualified acceptance of each of the compensation provisions of this chapter, and an agreement by it to be bound by the compensation provisions of this chapter.

- (g)(2) All policies of insurance companies and of reciprocal insurance associations, insuring the payment of compensation under this chapter, shall be conclusively presumed to cover all the employees and the entire compensation liability of the insured under this chapter in all cases in which the last day of the exposure rendering the employer liable is within the effective period of such policy.
- (g)(3) Any provision in any such policy attempting to limit or modify the liability of the company or association insuring the same shall be wholly void.
- (g)(4) Every policy of any company or association shall be deemed to include the following provisions:
  - "(A) The insurer assumes in full all the obligations to pay physician's fees, nurse's charges, hospital supplies, burial expenses, compensation, or death benefits imposed upon or accepted by the insured under this chapter.
  - (B) This policy is subject to the provisions of this chapter relative to the liability of the insured to pay physician's fees, nurse's charges, hospital services, hospital supplies, burial expenses, compensation, or death benefits to and for such employees, the acceptance of such liability by the insured, the adjustment, trial, and adjudication of claims for such physician's fees, nurse's charges, hospital services, hospital supplies, burial expenses, compensation, or death benefits.
  - (C) Between this insurer and the employee, notice to or knowledge of the occurrence of the disablement on the part of the insured (the employer) shall be notice or knowledge thereof, on the part of the insurer. The jurisdiction of the insured (the employer) for the purpose of this chapter is the jurisdiction of this insurer, and this insurer shall in all things be bound by and shall











1	be subject to the awards, judgments, and decrees rendered against
2	the insured (the employer) under this chapter.
3	(D) This insurer will promptly pay to the person entitled to the
4	same all benefits conferred by this chapter, including all
5	physician's fees, nurse's charges, hospital services, hospital
6	supplies, burial expenses, and all installments of compensation or
7	death benefits that may be awarded or agreed upon under this
8	chapter. The obligation of this insurer shall not be affected by any
9	default of the insured (the employer) after disablement or by any
10	default in giving of any notice required by this policy, or
11	otherwise. This policy is a direct promise by this insurer to the
12	person entitled to physician's fees, nurse's charges, fees for
13	hospital services, charges for hospital services, charges for
14	hospital supplies, charges for burial, compensation, or death
15	benefits, and shall be enforceable in the name of the person.
16	(E) Any termination of this policy by cancellation shall not be
17	effective as to employees of the insured covered hereby unless at
18	least thirty (30) days prior to the taking effect of such
19	cancellation, a written notice giving the date upon which such
20	termination is to become effective has been received by the
21	worker's compensation board of Indiana at its office in
22	Indianapolis, Indiana.
23	(F) This policy shall automatically expire one (1) year from the
24	effective date of the policy, unless the policy covers a period of
25	three (3) years, in which event, it shall automatically expire three
26	(3) years from the effective date of the policy. The termination
27	either of a one (1) year or a three (3) year policy, is effective as to
28	the employees of the insured covered by the policy.".
29	(g)(5) All claims for compensation, nurse's charges, hospital
30	services, hospital supplies, physician's fees, or burial expenses may be
31	made directly against either the employer or the insurer or both, and the
32	award of the worker's compensation board may be made against either
33	the employer or the insurer or both.
34	(g)(6) If any insurer shall fail to pay any final award or judgment
35	(except during the pendency of an appeal) rendered against it, or its
36	insured, or, if it shall fail to comply with this chapter, the worker's
37	compensation board shall revoke the approval of its policy forms, and
38	shall not accept any further proofs of insurance from it until it shall
39	have paid the award or judgment or complied with this chapter, and
40	shall have resubmitted its policy form and received the approval of the

(h) No policy of insurance covering the liability of an employer for



policy by the industrial board.

worker's compensation shall be construed to cover the liability of the employer under this chapter for any occupational disease unless the liability is expressly accepted by the insurance carrier issuing the policy and is endorsed in that policy. The insurance or security in force to cover compensation liability under this chapter shall be separate from the insurance or security under IC 22-3-2 through IC 22-3-6. Any insurance contract covering liability under either part of this article need not cover any liability under the other.

- (i) For the purpose of complying with subsection (c), groups of employers are authorized to form mutual insurance associations or reciprocal or interinsurance exchanges subject to any reasonable conditions and restrictions fixed by the department of insurance. This subsection does not apply to mutual insurance associations and reciprocal or interinsurance exchanges formed and operating on or before January 1, 1991, which shall continue to operate subject to the provisions of this chapter and to such reasonable conditions and restrictions as may be fixed by the worker's compensation board.
- (j) Membership in a mutual insurance association or a reciprocal or interinsurance exchange so proved, together with evidence of the payment of premiums due, is evidence of compliance with subsection (c).
- (k) Any person bound under the compensation provisions of this chapter, contracting for the performance of any work exceeding one thousand dollars (\$1,000) in value, in which the hazard of an occupational disease exists, by a contractor subject to the compensation provisions of this chapter without exacting from the contractor a certificate from the worker's compensation board showing that the contractor has complied with subsections (b), (c), and (d), shall be liable to the same extent as the contractor for compensation, physician's fees, hospital fees, nurse's charges, and burial expenses on account of the injury or death of any employee of such contractor, due to occupational disease arising out of and in the course of the performance of the work covered by such contract.

(l) Any contractor who sublets any contract for the performance of any work to a subcontractor subject to the compensation provisions of this chapter, without obtaining a certificate from the worker's compensation board showing that the subcontractor has complied with subsections (b), (c), and (d), is liable to the same extent as the subcontractor for the payment of compensation, physician's fees, hospital fees, nurse's charges, and burial expense on account of the injury or death of any employee of the subcontractor due to occupational disease arising out of and in the course of the



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perfori	mance of the work covered by the subcontract.
<del>(m)</del>	(k) A person paying compensation, physician's fees, hospital
fees, n	urse's charges, or burial expenses under <del>subsection (k) or (l),</del> <b>this</b>
article	may recover the amount paid or to be paid from any person who
would	otherwise have been liable for the payment thereof and may, in
additio	on, recover the litigation expenses and attorney's fees incurred in
the ac	tion before the worker's compensation board as well as the
litigati	on expenses and attorney's fees incurred in an action to collect
the cor	mpensation, medical expenses, and burial expenses.
<del>(n)</del>	(I) Every claim filed with the worker's compensation board under
this se	ction shall be instituted against all parties liable for payment.
The w	orker's compensation board, in an award under subsection (k),
<del>shall</del> fi	ix the order in which such parties shall be exhausted, beginning
with th	ne immediate employer and, in an award under subsection (1),
<del>shall</del> d	etermine whether the subcontractor has the financial ability to
pay the	<del>e compensation and medical expenses when due and, if not, shall</del>
<del>order</del> t	he contractor to pay the compensation and medical expenses.
(m)	An insurance company writing occupational disease
covera	nge in Indiana shall use the definition of independent
contra	actor set forth in section 9(b)(5) of this chapter to determine,
for rat	ting purposes, whether an employer-employee relationship
exists.	
	CTION 9. IC 22-3-7-34.5, AS AMENDED BY P.L.202-2001,
	ON 11, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
	1, 2004]: Sec. 34.5. (a) As used in this section, "independent
	ctor" refers to a person described in section 9(b)(5) of this
chapte	
	As used in this section, "person" means an individual, a
	etorship, a partnership, a joint venture, a firm, an association, a
_	ation, or other legal entity.
	(b) An independent contractor who does not make an election
	section 9(b)(2) of this chapter or section 9(b)(3) of this chapter
	subject to the compensation provisions of this chapter. <del>and must</del>
	statement with the department of state revenue and obtain a
	eate of exemption.
	An independent contractor shall file with the department of state
	e, in the form prescribed by the department of state revenue, a
	ent containing the information required by IC 6-3-7-5.
<del>(e)</del>	Together with the statement required in subsection (d), an

independent contractor shall file annually with the department

documentation in support of independent contractor status before being

granted a certificate of exemption. The independent contractor must



1	obtain clearance from the department of state revenue before issuance
2	of the certificate.
3	(f) An independent contractor shall pay a filing fee in the amount of
4	fifteen dollars (\$15) with the certificate filed under subsection (h). The
5	fees collected under this subsection shall be deposited in the worker's
6	compensation supplemental administrative fund and shall be used for
7	all expenses the board incurs.
8	(g) The worker's compensation board shall maintain a data base
9	consisting of certificates received under this section and on request
10	may verify that a certificate was filed.
11	(h) A certificate of exemption must be filed with the worker's
12	compensation board. The board shall indicate that the certificate has
13	been filed by stamping the certificate with the date of receipt and
14	returning a stamped copy to the person filing the certificate. A
15	certificate becomes effective as of midnight seven (7) business days
16	after the date file stamped by the worker's compensation board. The
17	board shall maintain a data base containing information required in
18	subsections (e) and (g).
19	(i) A person who contracts for services of another person not
20	covered by this chapter to perform work must secure a copy of a
21	stamped certificate of exemption filed under this section from the
22	person hired. A person may not require a person who has provided a
23	stamped certificate to have worker's compensation coverage. The
24	worker's compensation insurance carrier of a person who contracts with
25	an independent contractor shall accept a stamped certificate in the
26	same manner as a certificate of insurance.
27	(j) A stamped certificate filed under this section is binding on and
28	holds harmless for all claims:
29	(1) a person who contracts with an independent contractor after
30	receiving a copy of the stamped certificate; and
31	(2) the worker's compensation insurance carrier of the person who
32	contracts with the independent contractor.
33	The independent contractor may not collect compensation under this
34	chapter for an injury from a person or the person's worker's
35	compensation carrier to whom the independent contractor has
36	furnished a stamped certificate.
37	SECTION 10. IC 6-3-7-5 IS REPEALED [EFFECTIVE JULY 1,
38	2004].
39	SECTION 11. [EFFECTIVE UPON PASSAGE] (a) The worker's
40	compensation board, with the assistance of the worker's
41	compensation rating bureau and the department of insurance, shall
42	adont a definition of the term "independent contractor" under



- 1 IC 22-3-6-1(b)(7) and IC 22-3-7-9(b)(5), both as amended by this
- 2 act, before December 31, 2005.
- 3 (b) This SECTION expires January 1, 2006.
- 4 SECTION 12. An emergency is declared for this act.

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